

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 30

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 Rely on Your Beliefs Fund

A.

Full Name (Last, First, Middle Initial)
 Kirk Schuring

Mailing Address 400 Market Ave N Ste 400

City State Zip Code
 Canton OH 44702-1553

Purpose of Disbursement
 CONTRIBUTION

Candidate Name
 KIRK SCHURING

Office Sought: ☒ House
☐ Senate
☐ President

State: OH District: 16

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 81007.E1566

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
 David Schweikert for Congress

Mailing Address 15748 E El Lago

City State Zip Code
 Fountain Hills AZ 85268-

Purpose of Disbursement
 CONTRIBUTION

Candidate Name
 DAVID SCHWEIKERT

Office Sought: ☒ House
☐ Senate
☐ President

State: AZ District: 06

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 80917.E1535

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
 Steve Stivers for Congress

Mailing Address 211 S 5th St

City State Zip Code
 Columbus OH 43215-5203

Purpose of Disbursement
 CONTRIBUTION

Candidate Name
 STEVE STIVERS

Office Sought: ☒ House
☐ Senate
☐ President

State: OH District: 15

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 81007.E1565

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)